STATE BOARD OF ACCOUNTS 302 West Washington Street Room E418 INDIANAPOLIS, INDIANA 46204-2769

AUDIT REPORT OF

PUTNAM COUNTY HOSPITAL A COMPONENT UNIT OF PUTNAM COUNTY, INDIANA

January 1, 2007 to December 31, 2007

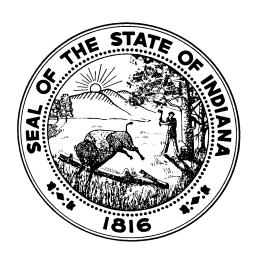




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HOSPITAL OFFICIALS

Office	<u>Official</u>	<u>Term</u>
Executive Director	Dennis Weatherford	01-01-07 to 12-31-08
Treasurer	Dennis Weatherford	01-01-07 to 12-31-08
Chairman of the Hospital Board	James Malayer Keith Ernst	01-01-07 to 12-31-07 01-01-08 to 12-31-08
President of the Board of County Commissioners	Kristina Warren Gene Beck	01-01-07 to 12-31-07 01-01-08 to 12-31-08



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INDEPENDENT AUDITOR'S REPORT

TO: THE OFFICIALS OF THE PUTNAM COUNTY HOSPITAL, PUTNAM COUNTY, INDIANA

We have audited the accompanying basic financial statements of Putnam County Hospital (Hospital), as of and for the year ended December 31, 2007, as listed in the Table of Contents. These financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the Hospital as of December 31, 2007, and the respective changes in financial position and cash flows, thereof for the year then ended in conformity with accounting principles generally accepted in the United States.

The Hospital has not presented Management Discussion and Analysis that the Governmental Accounting Standards Board has determined is necessary to supplement, although not required to be a part of, the basic financial statements.

STATE BOARD OF ACCOUNTS

June 4, 2008

PUTNAM COUNTY HOSPITAL A COMPONENT UNIT OF PUTNAM COUNTY, STATE OF INDIANA STATEMENT OF NET ASSETS December 31, 2007

<u>Assets</u>	Primary Government
Current assets: Cash and cash equivalents Patient accounts receivable, net of	\$ 3,001,094
estimated uncollectibles of \$5,722,569 Supplies and other current assets	5,689,588 1,760,290
Noncurrent cash and investments: Internally designated Restricted by contributors and grantors	2,948,050 121,193
Capital assets: Land and construction in progress Depreciable capital assets, net of accumulated depreciation Other assets, net of accumulated amortization	1,662,864 16,085,344
Total assets	223,350 \$ 31,491,773
Liabilities and Net Assets	
Current liabilities: Current maturities of long-term debt Accounts payable and accrued expenses Estimated third-party payor settlements Other current liabilities Long-term debt, net of current maturities Other long-term liabilities	\$ 567,194 1,434,002 482,879 1,011,902 10,725,356 29,271
Total liabilities	14,250,604
Net assets: Invested in capital assets, net of related debt Restricted:	6,455,658
Expendable for specific operating activities Unrestricted	121,193 10,664,318
Total net assets	17,241,169
Total liabilities and net assets	\$ 31,491,773

The accompanying notes are an integral part of the financial statements.

PUTNAM COUNTY HOSPITAL A COMPONENT UNIT OF PUTNAM COUNTY, STATE OF INDIANA STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS Year Ended December 31, 2007

	Primary Government
Operating revenues: Net patient service revenue (net of provision for bad debt) Other	\$ 31,478,413 160,259
Total operating revenues	31,638,672
Operating expenses: Salaries and benefits Medical supplies and drugs Insurance Other supplies Depreciation and amortization Other operating expense	16,581,662 4,913,826 767,928 1,656,595 2,199,376 5,969,488
Total operating expenses	32,088,875
Operating loss	(450,203)
Nonoperating revenues (expenses): Investment income Investment expense Noncapital grants and contributions Gain on sale of equipment	224,573 (474,759) 148,971 1,555
Total nonoperating revenues (expenses)	(99,660)
Decrease in net assets	(549,863)
Net assets beginning of the year Prior period adjustment (Note III.E)	17,954,219 (163,187)
Restated net assets beginning of the year	17,791,032
Net assets end of the year	\$ 17,241,169

The accompanying notes are an integral part of the financial statements.

PUTNAM COUNTY HOSPITAL A COMPONENT UNIT OF PUTNAM COUNTY, STATE OF INDIANA STATEMENT OF CASH FLOWS - RESTRICTED AND UNRESTRICTED FUNDS Year Ended December 31, 2007

Cash flows from operating activities: Receipts from and on behalf of patients Payments to suppliers and contractors Payments to employees Other receipts and payments, net Net cash provided by operating activities	\$ 31,439,130 (6,992,336) (16,567,544) (5,626,350)
Net cash provided by operating activities	2,252,900
Cash flows from noncapital financing activities: Noncapital grants and contributions	148,971
Cash flows from capital and related financing activities: Principal paid on long-term debt Interest paid on long-term debt Purchase of capital assets Proceeds from sale of capital assets	(554,023) (474,759) (2,148,781) 1,555
Net cash used by capital and related financing activities	(3,176,008)
Cash flows from investing activities: Interest and dividends on investments	224,573
Net decrease in cash and cash equivalents	(549,564)
Cash and cash equivalents at beginning of year	6,619,901
Cash and cash equivalents at end of year	\$ 6,070,337
Reconciliation of cash and cash equivalents to the Statement of Net Assets: Cash and cash equivalents in current assets Restricted cash and cash equivalents Total cash and cash equivalents	\$ 5,949,144 121,193 \$ 6,070,337
Reconciliation of operating loss to net cash provided by operating activities: Operating loss Adjustments to reconcile operating loss to net cash flows provided in operating activities:	\$ (450,203)
Depreciation and amortization Provision for bad debts (Increase) decrease in current assets:	2,199,376 3,561,116
Patient accounts receivable Supplies and other current assets Increase in current liabilities:	(3,600,399) 26,063
Accounts payable and accrued expenses Other current liabilities Estimated third-party payor settlements	319,950 14,118 182,879
Net cash provided in operating activities	\$ 2,252,900

The accompanying notes are an integral part of the financial statements.

PUTNAM COUNTY HOSPITAL NOTES TO FINANCIAL STATEMENTS

I. Summary of Significant Accounting Policies

A. Reporting Entity

Putnam County Hospital (Hospital) is a county-owned facility and operates under the Indiana County Hospital Law, Indiana Code 16-22. The Hospital provides short-term inpatient and outpatient health care.

The Board of County Commissioners of Putnam County appoints the Governing Board of the Hospital and a financial benefit/burden relationship exists between the County and the Hospital. For these reasons, the Hospital is considered a component unit of Putnam County.

The accompanying financial statements present the activities of the Hospital (primary government). There are no significant component units which require inclusion.

B. Enterprise Fund Accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Based on Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, as amended, the Hospital has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), including those issued after November 30, 1989, that do not conflict with or contradict GASB pronouncements.

C. Assets, Liabilities and Net Assets or Equity

1. Deposits and Investments

Cash and cash equivalents include demand deposits and investments in highly liquid debt instruments with an original maturity date of three months or less.

Statutes authorize the Hospital to invest in interest-bearing deposit accounts, passbook savings accounts, certificates of deposit, money market deposit accounts, mutual funds, pooled fund investments, securities backed by the full faith and credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by U.S. Government or U.S. Government Agency obligations.

Investment income, including changes in the fair value of investments, is reported as non-operating revenues in the Statement of Revenues, Expenses, and Changes in Net Assets.

2. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

3. Capital Assets

Capital assets, which include land, land improvements, buildings and improvements, and equipment, are reported at actual or estimated historical cost based on appraisals or deflated current replacement cost. Contributed or donated assets are reported at estimated fair value at the time received.

Capitalization thresholds (the dollar values above which asset acquisitions are added to the capital asset accounts), depreciation methods and estimated useful lives of capital assets reported in the financial statements are as follows:

	italization reshold	Depreciation Method	Estimated Useful Life
Land improvements	\$ 1,000	Straight-line	2-25 Years
Buildings and improvements	1,000	Straight-line	10-40 Years
Equipment	1,000	Straight-line	3-25 Years

For depreciated assets, the cost of normal maintenance and repairs that do not add to the value of the asset or materially extend asset lives are not capitalized.

Major outlays for capital assets and improvements are capitalized as projects are constructed. Interest incurred during the construction phase of capital assets is included as part of the capitalized value of the assets constructed.

4. Net Assets

Net assets of the Hospital are classified in three components.

Net assets invested in capital assets net of related debt consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets.

Restricted expendable net assets are noncapital net assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the hospital, including amounts deposited with trustees as required by revenue bond indentures, discussed in Note II.G.

Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

D. Grants and Contributions

From time to time, the Hospital receives grants from Putnam County and the State of Indiana as well as contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

E. Restricted Resources

When the Hospital has both restricted and unrestricted resources available to finance a particular program, it is the Hospital's policy to use restricted resources before unrestricted resources.

F. Operating Revenues and Expenses

The Hospital's Statement of Revenues, Expenses and Changes in Net Assets distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services - the Hospital's principal activity. Nonexchange revenues, including grants, and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

G. Compensated Absences

1. Sick Leave

Part-time and full-time Hospital employees earn sick leave at the rate of 3 and 5 days per year, respectively. Sick leave does not accumulate from year to year.

2. Vacation Leave

Hospital employees earn vacation leave at rates from 10 days to 20 days per year based upon the number of years of service. Vacation leave does not accumulate from year to year.

3. Personal Leave

Hospital employees earn personal leave at the rate of 1 day per year. Personal leave does not accumulate from year to year.

Vacation, sick and personal leave is accrued when incurred and reported as a liability.

II. Detailed Notes

A. Deposits

Deposits with financial institutions in the State of Indiana at year end were entirely insured by the Federal Depository Insurance Corporation or by the Indiana Public Deposit Insurance Fund. This includes any deposit accounts issued or offered by a qualifying financial institution.

B. Accounts Receivable and Payable

Patient accounts receivable and accounts payable (including accrued expenses) reported as current assets and liabilities by the Hospital at year end consisted of these amounts:

Patient Accounts Receivable

Receivable from patients and their insurance carriers Receivable from Medicare Receivable from Medicaid	\$ 7,861,626 2,223,465 1,327,066
Total patient accounts receivable	11,412,157
Less allowance for uncollectible amounts	5,722,569
Patient accounts receivable, net	\$ 5,689,588
Accounts Payable and Accrued Expenses	
Payable to employees (including payroll taxes) Payable to suppliers	\$ 502,849 931,153
Total accounts payable and accrued expenses	\$ 1,434,002

C. Capital Assets

Capital asset activity for the year ended December 31, 2007, was as follows:

Primary Government	Beginning Balance	Prior Period Adjustment	Restated Beginning Balance	Increases	Decreases	Ending Balance
Capital assets, not being depreciated: Land	\$ 159,364	\$ -		\$ -	\$ -	\$ 159,364
Construction in progress	575,840		575,840	1,545,289	617,629	1,503,500
Total capital assets, not						
being depreciated	735,204		735,204	1,545,289	617,629	1,662,864
Capital assets, being depreciated:						
Land improvements	243,777	-	243,777	45,124	-	288,901
Buildings and improvements	24,249,571	-	24,249,571	86,012	-	24,335,583
Equipment	10,841,097		10,841,097	1,089,977	37,467	11,893,607
Totals	35,334,445		35,334,445	1,221,113	37,467	36,518,091
Less accumulated depreciation for:						
Land improvements	192,360	-	192,360	7,530	-	199,890
Buildings and improvements	10,383,491	-	10,383,491	938,547	-	11,322,038
Equipment	7,534,374	163,187	7,697,561	1,250,725	37,467	8,910,819
Totals	18,110,225	163,187	18,273,412	2,196,802	37,467	20,432,747
Total capital assets, being depreciated, net	17,224,220	(163,187)	17,061,033	(975,689)		16,085,344
Total primary government						
capital assets, net	\$ 17,959,424	\$ (163,187)	\$ 17,796,237	\$ 569,600	\$ 617,629	\$ 17,748,208

D. Construction Commitments

Construction work in progress is composed of the following:

	Total Project	Expended to December 31,		Required Future
<u>Project</u>	Authorized	2007	Committed	Funding
Hospital additions and improvements	\$ 1,517,536	\$ 1,503,500	\$ 5,909	\$ -

E. Leases

Operating Lease

The Hospital has entered into an operating lease having initial or remaining noncancelable terms exceeding one year for copiers. Rental expenditures for this lease were \$2,065. The following is a schedule by years of future minimum rental payments as of year end:

2008	\$ 24,780
2009	24,780
2010	24,780
2011	24,780
2012	22,715
Total	\$ 121,835

F. Long-Term Liabilities

1. Notes Payable

The Hospital has entered into various notes. Annual debt service requirements to maturity for the notes, including interest of \$3,648,442, are as follows:

2010 2011 2012	1,003,960 1,003,960 1,003,960
2013-2017 2018-2022	5,019,800 4,901,392
Total	\$ 14,940,992

2. Changes in Long-Term Liabilities

Long-term liability activity for the year ended December 31, 2007, was as follows:

Primary Government	Beginn Balan	•	lditions	Reductions	Ending Balance	Due Within One Year
Capital leases Notes payable	\$ 16 11,830	6,492 \$ 0,081	- \$	\$ 16,492 537,531	\$ - 11,292,550	\$ - 567,194
Total long-term liabilities	\$ 11,846	<u>\$</u>		\$ 554,023	\$ 11,292,550	\$ 567,194

G. Endowments and Restricted Net Assets

Restricted, expendable net assets are available for the following purposes:

	 2007
Restricted by contributors:	
General	\$ 121,193

Unless the contributor provides specific instructions, state statute permits the Hospital Board to authorize for expenditure the net appreciation (realized and unrealized) of the investments in its endowments. When administering its power to spend net appreciation, the Hospital Board is required to consider the Hospital's "long- and short-term needs, present and anticipated financial requirements, expected total return on its investments, price-level trends, and general economic conditions." Any net appreciation that is spent is required to be spent for the purposes designated by the contributor.

H. Charity Care

Charges excluded from revenue under the Hospital's charity care policy were \$855,745 for 2007.

I. Internally Designated Assets

Noncurrent cash and investments internally designated include the following:

- 1. Funded Depreciation Amounts transferred from the Operating Fund by the Hospital Board of Trustees through funding depreciation expense. Such amounts are to be used for equipment and building, remodeling, repairing, replacing or making additions to the Hospital buildings as authorized by Indiana Code 16-22-3-13.
- 2. Designated Funds Assets set aside by the Hospital Board of Trustees for identified purposes and over which the Board retains control and may, at its discretion, subsequently use for other purposes.

III. Other Information

A. Risk Management

The Hospital is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; job related illnesses or injuries to employees; medical benefits to employees, and dependents; and natural disasters.

The risks of torts; theft of, damage to, and destruction of assets; errors and omissions; job related illnesses or injuries to employees; and natural disasters are covered by commercial insurance from independent third parties. Settled claims from these risks have not exceeded commercial insurance coverage for the past three years. There were no significant reductions in insurance by major category of risk.

Medical Benefits to Employees and Dependents

The Hospital has chosen to establish a risk financing fund for risks associated with medical benefits to employees and dependents. The risk financing fund is accounted for in the general ledger where assets are set aside for claim settlements. An excess policy through commercial insurance covers individual claims in excess of \$60,000 per year. Settled claims resulting from this risk did not exceed commercial insurance coverage in the past three years.

Claim expenditures and liabilities of the fund are reported when it is probable that a loss has occurred and the amount of the loss can be reasonably estimated. These losses include an estimate of claims that have been incurred but not reported (IBNRs). Claim liabilities are calculated considering the effects of inflation, recent claim settlement trends including frequency and amounts of payouts and other economic and social factors.

However, claim liabilities cannot be reasonably estimated.

B. Fair Value of Financial Instruments

The following methods and assumptions were used by the Hospital in estimating the fair value of its financial instruments:

Cash and Cash Equivalents

The carrying amount reported in the Statement of Net Assets for cash and cash equivalents approximates its fair value.

Accounts Payable and Accrued Expenses

The carrying amount reported in the Statement of Net Assets for accounts payable and accrued expenses approximates its fair value.

Estimated Third-Party Payor Settlements

The carrying amount reported in the Statement of Net Assets for estimated third-party payor settlements approximates its fair value.

C. Estimated Third-Party Settlements

Regulations in effect require annual retroactive settlements for third-party settlements based upon cost reports filed by the Hospital. These retroactive settlements are estimated and recorded in the accompanying financial statements. Changes in these estimates are reflected in the year in which they occur.

D. Pension Plan

Defined Contribution Pension Plan

Putnam County Hospital Employee Pension Plan

Plan Description

The Hospital has a defined contribution pension plan administered by Lincoln Financial Group as authorized by Indiana Code 16-22-3-11. The plan provides retirement, disability, and death benefits to plan members and beneficiaries. The plan was established by written agreement between the Hospital Board of Trustees and the Plan Administrator. The Plan Administrator issues a publicly available financial report that includes financial statements and required supplementary information of the plan. That report may be obtained by contacting:

Lincoln Financial Group P.O. Box 2340 Ft. Wayne, IN 46801-2340 Ph. 800-248-0838

Funding Policy and Annual Pension Cost

The contribution requirements of plan members are established by the written agreement between the Hospital Board of Trustees and the Plan Administrator. The Hospital fully funds the plan by contributing 8% of the annual covered payroll. A second provision of the plan established pursuant to Section 403(b) of the Internal Revenue Code of 1986, as amended, allows for voluntary contributions for the purpose of purchasing retirement annuity contracts. The Hospital matches qualifying employee contributions up to a maximum of 3.5% of the first 6% of employee contributions. Employer and employee contributions to the plan were \$606,275 and \$654,655, respectively.

E. Restatements and Reclassifications

For the year ended December 31, 2007, certain changes have been made to the financial statements to more appropriately reflect financial activity of the Hospital. The following schedule presents a summary of restated beginning balances. The prior period adjustment represents correction of errors in formulas used for calculating depreciation expense.

Balance	Balance		
as Reported	Prior	as Restated January 1, 2007	
December 31,	Period		
2006	Adjustment		
\$ 17,954,219	\$ (163,187)	\$ 17,791,032	
	as Reported December 31, 2006	as Reported Prior December 31, Period 2006 Adjustment	

PUTNAM COUNTY HOSPITAL AUDIT RESULTS AND COMMENTS

PHARMACY INVENTORY

The Hospital completed an inventory of pharmacy goods; however, due to errors in accumulating inventory counts from all areas, the inventory total submitted was not accurate.

During the year, expired inventory is periodically removed from stock. Reports detailing dollar values of expired inventory were not submitted to the accounting department for adjustment.

The Hospital is responsible for completing an accurate inventory of pharmacy goods on a regular basis. The inventory should be performed as near as possible to the end of the Hospital's fiscal year. (Accounting and Uniform Compliance Guidelines Manual for County and City Hospitals, Chapter 9)

Governmental units should have internal controls in effect which provide reasonable assurance regarding the reliability of financial information and records, effectiveness and efficiency of operations, proper execution of management's objectives, and compliance with laws and regulations. Among other things, segregation of duties, safeguarding controls over cash and all other assets and all forms of information processing are necessary for proper internal control. (Accounting and Uniform Compliance Guidelines Manual for County and City Hospitals, Chapter 1)

PENALTIES, INTEREST AND OTHER CHARGES

Indiana withholding tax in the amount of \$21,153 was remitted to the Indiana Department of Revenue on August 20, 2007, for the month of July; however, \$27,219 in withholdings remained unpaid. The error was discovered in 2008 and the remaining balance was paid on February 29, 2008. Penalties and interest totaling \$2,944 were paid to the Indiana Department of Revenue on March 14, 2008, for the month of July 2007.

Officials and employees have the duty to pay claims and remit taxes in a timely fashion. Additionally, officials and employees have a responsibility to perform duties in a manner which would not result in any unreasonable fees being assessed against the governmental unit. Any penalties, interest or other charges paid by the governmental unit may be the personal obligation of the responsible official or employee. (Accounting and Uniform Compliance Guidelines Manual for County and City Hospitals, Chapter 1)

PUTNAM COUNTY HOSPITAL EXIT CONFERENCE

The contents of this report were discussed on June 4, 2008, with Dennis Weatherford, Executive Director; Roger Boruff, Chief Financial Officer; David Bray, Vice President of the Hospital Board of Trustees; Fred Mann, Secretary/Treasurer of the Hospital Board of Trustees; and Debbie Krumreich, Accounting Manager. The officials concurred with our audit findings.